APR 09 2015

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RESENTATIVES	FORM B FORM B FORM B	LEGISLATIVE RESOURCE OF THE
FINANCIAL DISCLOSURE STATEMENT	ers, caridinates, and new employees	2015 APR 14 AM 10: 13
Name: WILLIAM BALLARD KURD Daytime Tele	Telephone:	OFFICE OF THE CLERK
New Member of or Candidate for State: 1X U.S. House of Representatives District: 123 Candidates - Date of Election: (2 Nov 20) (-	Chack if Amendment	(Office Use Only)
New Officer or Employee Employing Office:	Period Covered: January 1, 2013 to 000 '31, 2013	A \$200 pensity shall be assessed against any individual who files more than 30 days iste.
PRELIMINARY INFORMATION - ANSWER EACH OF THESE QUESTIONS	STIONS	
A. Did you, your spause, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? Of b. Make more than \$200 in unearmed income from any reportable asset during the reporting period?	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of sling?	the reporting period Yes No No
C. Did you or your spouse have "earned" income (e.g., salaries, honoraris, or pension/IRA distributions) of \$200 or more during the Yes No reporting period?	F. Do you have any reportable agreements or arrangements with an outside entity?	r arrangements with Yes No
D. Did you, your spouse, or your dependent child have any reportable Yes No liability (more than \$10,000) at any point during the reporting period?	J. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years?	n \$5,000 from a single Yes No
ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRE		"YES" D TO COMPLETE
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF TH	ON - ANSWER BOTH OF THESE	IESE QUESTIONS
TRUSTS - Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from the report details of such a trust that benefits you, your spouse, or dependent child?	other "excepted trusts" need not be disclosed. He	we you excluded from Yess . No .
EXEMPTION - Have you excluded from this report any other assets, "unearned" income, transactions, or tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	x liabilities of a spouse or dependent child	because they meet all three Yes No No

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Funds	BUILT IRA MUM	Thornburg Income	IRA MUNITUMS	Royce Divident Value	ABIC Hedge Fund X	Change	No. Hope Con Stock	For bank and other cush accounts, total the ancount in all between-boarding accounts. If the total to over \$0.000, tild every financial institution where there is more than \$1.000 in married beeing accounts. For next and other real property hald for investment provide a complete achieves or description, e.g., tental property, and a city and state. For an ownsurably interest in a physical-y-hald business that is not publicly traded, state the name of the pusitions; the maker of its activities, and its posture of the pusitions; the maker of its activities, and its property for powers relations, including account comes and vacation hopies (states there was mind anone during the reporting period; and any firemain anone during the reporting period; and any firemain anone during the reporting period; and any firemain afternant program, including the Thetit Sevings Plan. If you have a privately harded fand that has asset or account in the choose, you may include that an easet or account of the count of the late of the late. For a desided discussion of Schedule A generalization to design the second of the property of the	For all IRAs and other retramant plans (such as 40104) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.	(do not use only fiction symbols).			production of income and with a few mariest value you exceeding \$1,000 at the end of the reporting period, but	Assets and/or income Sources	
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SCHEDULE A -- ASSETS & "UNEARNED INCOME"

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Use additional sheets if more space is required.

SCHEDULE B - TRANSACTIONS

Name: William B. Hurd

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SCHEDULE D - LIABILITIES

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Report liabilities of over \$10,000 owed to sary one creditor at any time during the reporting period by you, your spouse, or your dependent child. Man't the highest amount owed during the reporting period. New Members: Members are required to report at liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence furnishes you rent it out or are a Member); loaners secured by automobiles, household furnishes, or appliances; liabilities of a business in which you own an interest (unless you are personally liability); and liabilities owed to you by a spouse or the child, parent, or albing of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. "Column K is for liabilities held solely by your spouse or dependent child.

Example		og. F			extraoring \$10,000.
	First Bank of Wilmington, DE	Creditor			Contras of se lot separates train sched by your shouse of dependent case.
	6888	Date Liability Incurred MO/YR			wy by your apous
	Montgage on Rental Property, Dover, DE	Type of Liability			s of capendasi Casto.
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SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions lated in Schedule C; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary mature. New Manubers and second-wast carefulates are continued in the political parties and campaign organizations); and positions solely of an honorary mature. New Manubers and second-wast carefulates.

Position	Position Position Name of Organization

SCHEDULE C -- EARNED INCOME

Page 6 of 8	

EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act. List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below.

Name:

Source (include date of receipt for honoraria) Add Transmission Proceeding Year Proceeding Year		Amount		Am	Amount
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State of Mary Internal (A (Ost.) South State) Other Round State State of State No. 100 State of State State of State No. 100 No. 100 State of State State of State No. 100 N		ABC Trade Association, Ballimore, MD (July 15)	Honorarium	\$0	\$500
Total Date of Education Space State of Education Space State of Education AN Space State of	Examples:	Side of Mayland	Selety	\$20,000	\$78,000
	-	Chit wat Roundaine, Ricitingny, VA (Oct. 2) Ontario County Board of Education	Spouse Speech Spouse Salary	N/A	\$1,000 N/A

SCHEDULE F - AGREEMENTS

Name:	
Page 7 of 8	1

identify the du continuation of	se, parties to, and general terms of any agreement or anangement that you have defenal of payments by a former or current employer other than the U.S. gove	identify the date, parties to, and general terms of any agreement or smangement that you have with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee wettere or benefit plan maintained by a former employer.
Date	Parties to Agreement	Terms of Agreement

SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, perbnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by law. Do not repeat information thanks on Schedule.

Section and any appropriate Construction Construction as a least to	Section and any anomalies considered considerates a result of a privileged restrictionable by law. Do not repeat information liesed on Schedule C.
Source (Name and City/State)	Brief Description of Duties
Example: Doe Jones & Smith, Hometown, Homestate	Accounting Services
Pragabal, San Aubonio, TX	No incomin excess of \$5000
Coverile Done, Austin, TX	No incom in excess of \$5006
Fusion X, Averyson, UX	No income in excess of \$ 5000

FILER NOTES (Optional)

Name: Page 8 of 8

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